

9.0 SUBMISSION FORMS

Proposal to the Department of Commerce COVER PAGE			
PROGRAM SBIR - SMALL BUSINESS INNOVATION RESEARCH		This firm and/or Principal Investigator ____ has ____ has not submitted proposals for essentially equivalent work under other federal program solicitations, or ____ has ____ has not received other federal awards for essentially equivalent work.	
SOLICITATION NO.: DOC 98-1		CLOSING DATE: January 14, 1998	
NAME OF SUBMITTING FIRM			
ADDRESS OF FIRM (INCLUDE ZIP CODE)			
TITLE OF PROPOSED PROJECT			
REQUESTED AMOUNT \$		PROPOSED DURATION 6 months	
SOLICITATION SUBTOPIC NO.		SOLICITATION SUBTOPIC TITLE	
THE ABOVE ORGANIZATION CERTIFIES THAT:			YES NO
1. It is a small business firm as defined on page 3.			<input type="checkbox"/> <input type="checkbox"/>
2. The primary employment of the principal investigator will be with this firm at the time of award and during the conduct of the research.			<input type="checkbox"/> <input type="checkbox"/>
3. A minimum of two-thirds of research will be performed by this firm in Phase 1.			<input type="checkbox"/> <input type="checkbox"/>
4. It qualifies as a minority and disadvantaged small business as defined on page 3.*			<input type="checkbox"/> <input type="checkbox"/>
5. It qualifies as a woman-owned small business as defined on page 3.*			<input type="checkbox"/> <input type="checkbox"/>
6. It will permit the government to disclose the title and technical abstract page, plus the name, address and telephone number of the corporate official if the proposal does not result in an award to parties that may be interested in contacting you for further information or possible investment.			<input type="checkbox"/> <input type="checkbox"/>
PRINCIPAL INVESTIGATOR/ PROJECT DIRECTOR		CORPORATE OFFICIAL (BUSINESS)	
NAME		NAME	
SIGNATURE		SIGNATURE	
TITLE		TITLE	
DATE TELEPHONE NO. + AREA CODE		DATE TELEPHONE NO. + AREA CODE	
YEAR FIRM FOUNDED		HAS THIS PROPOSAL BEEN SUBMITTED TO ANOTHER AGENCY? Yes _____ No _____	
NUMBER OF EMPLOYEES Avg. Previous 12 mos. _____ Currently _____		IF YES, WHAT AGENCY?	
* For statistical purposes only			
<p style="text-align: center;">PROPRIETARY NOTICE</p> <p>For any purpose other than to evaluate the proposal, this data shall not be disclosed outside the Government and shall not be duplicated, used or disclosed in whole or in part, provided that if a funding agreement is awarded to this proposer as a result of or in connection with this submission of this data, the Government shall have the right to duplicate, use, or disclose the data to the extent provided in the funding agreement. This restriction does not limit the Government's right to use information contained in the data source without restriction. The data in this proposal subject to this restriction is contained on separate proprietary page(s).</p>			

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Department of Commerce
Small Business Innovation Research Program
PROJECT SUMMARY

NAME OF FIRM		AMOUNT REQUESTED
ADDRESS		PHONE #
		FAX #
PRINCIPAL INVESTIGATOR (NAME AND TITLE)		
TITLE OF PROJECT		
SOLICITATION SUBTOPIC NO.	SOLICITATION SUBTOPIC TITLE	
TECHNICAL ABSTRACT (LIMIT TO 200 WORDS)		
POTENTIAL COMMERCIAL APPLICATIONS OF THE RESEARCH		

SBIR PROPOSAL SUMMARY BUDGET

FIRM:

PROPOSAL NUMBER :
(Leave Blank)

PRINCIPAL INVESTIGATOR:

DIRECT LABOR:

TOTAL PRICE

\$

OVERHEAD RATE:

\$

SUBTOTAL:

\$

OTHER DIRECT COSTS:

\$

MATERIALS:

\$

SUBTOTAL:

\$

GENERAL AND ADMINISTRATIVE (G&A):

\$

PROFIT:

\$

TOTAL PRICE PROPOSED:

\$

TYPED NAME AND TITLE:

SIGNATURE:

THIS PROPOSAL IS SUBMITTED IN RESPONSE TO DOC SBIR PROGRAM SOLICITATION 98-1
AND REFLECTS OUR BEST ESTIMATES AS OF THIS DATE.

DATE SUBMITTED: _____